

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Thorsten Bechert et al.
Serial No. : 10/585,606
Filed : May 17, 2007

Title : WOUND COVERING

Art Unit : 3772
Examiner : Kim M. Lewis
Confirmation No.: 7193
Notice of Allowance Date: June 12, 2009

MAIL STOP ISSUE FEE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO NOTICE OF ALLOWANCE

In response to the Notice of Allowance mailed June 12, 2009, enclosed is a completed Issue Fee Transmittal Form PTOL-85B.

Please apply \$1810 for the Issue Fee and Publication Fee and any other charges or credits to Deposit Account No. 06-1050.

Respectfully submitted,

/September 10, 2009/

/M. Angela Parsons/

Date: _____

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CERTIFICATE OF MAILING BY EFS-WEB FILING

I hereby certify that this paper was filed with the Patent and Trademark Office using the EFS-WEB system on this date: September 10, 2009

PART B – FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail **Mail Stop ISSUE FEE
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26191 7590 06/12/2009

**FISH & RICHARDSON P.C.
P.O. Box 1022
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/585,606	05/17/2007	Thorsten Bechert	21270-0002US1	7193

TITLE OF INVENTION: WOUND COVERING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$1810	09/14/2009
EXAMINER	ART UNIT	CLASS-SUBCLASS			
LEWIS, KIM M.	3772	602-048000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

[] Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

[] "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Fish & Richardson P.C.

2. _____

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE (CITY and STATE OR COUNTRY)

Bio-Gate AG

Nuremberg, Germany

Please check the appropriate assignee category or categories (will not be printed on the patent): [] individual [X] corporation or other private group entity [] government

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5. Change in Entity Status (from status indicated above)

[].a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

[].b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered agent or; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

(Authorized Signature) M. Angela Parsons/

(Date) September 10, 2009

Typed or Printed Name M. Angela Parsons, Ph.D.

Registration No. 44,282

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